

JUN 30 2005

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 10/670,534 Filing Date 9/25/2003 First Named Inventor Bian Examiner Name Marcheschi Art Unit 1755	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Attorney Docket No. 03010	
TOTAL AMOUNT OF PAYMENT (\$ 130.00)			

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 500815 Deposit Account Name: Rohm and Haas Electronic Materials CMP Holdings, Inc. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

FEE CALCULATION																																																								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																																								
FILING FEES <table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> </tr> </tbody> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	Design	200	100	Plant	200	100	Reissue	300	150	Provisional	200	100	SEARCH FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>100</td> <td>50</td> </tr> <tr> <td>300</td> <td>150</td> </tr> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>0</td> <td>0</td> </tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	500	250	100	50	300	150	500	250	0	0	EXAMINATION FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>100</td> </tr> <tr> <td>130</td> <td>65</td> </tr> <tr> <td>160</td> <td>80</td> </tr> <tr> <td>600</td> <td>300</td> </tr> <tr> <td>0</td> <td>0</td> </tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	200	100	130	65	160	80	600	300	0	0	Fees Paid (\$) <table border="1"> <thead> <tr> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>50</td> </tr> <tr> <td>25</td> </tr> <tr> <td>200</td> </tr> <tr> <td>100</td> </tr> <tr> <td>360</td> </tr> <tr> <td>180</td> </tr> </tbody> </table>		Small Entity	50	25	200	100	360	180
Application Type	Fee (\$)	Small Entity Fee (\$)																																																						
Utility	300	150																																																						
Design	200	100																																																						
Plant	200	100																																																						
Reissue	300	150																																																						
Provisional	200	100																																																						
Fee (\$)	Small Entity Fee (\$)																																																							
500	250																																																							
100	50																																																							
300	150																																																							
500	250																																																							
0	0																																																							
Fee (\$)	Small Entity Fee (\$)																																																							
200	100																																																							
130	65																																																							
160	80																																																							
600	300																																																							
0	0																																																							
Small Entity																																																								
50																																																								
25																																																								
200																																																								
100																																																								
360																																																								
180																																																								
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Multiple Dependent Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 20 or HP = 0</td> <td>x</td> <td>\$50.00</td> <td>=</td> <td>\$ 0.00</td> <td></td> <td></td> </tr> <tr> <td>HP = highest number of total claims paid for, if greater than 20</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>- 3 or HP = 0</td> <td>x</td> <td>\$200.00</td> <td>=</td> <td>\$ 0.00</td> <td></td> <td></td> </tr> <tr> <td>HP = highest number of independent claims paid for, if greater than 3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	- 20 or HP = 0	x	\$50.00	=	\$ 0.00			HP = highest number of total claims paid for, if greater than 20							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				- 3 or HP = 0	x	\$200.00	=	\$ 0.00			HP = highest number of independent claims paid for, if greater than 3													
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)																																																		
- 20 or HP = 0	x	\$50.00	=	\$ 0.00																																																				
HP = highest number of total claims paid for, if greater than 20																																																								
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																																																					
- 3 or HP = 0	x	\$200.00	=	\$ 0.00																																																				
HP = highest number of independent claims paid for, if greater than 3																																																								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 = 0</td> <td>/ 50 = 0</td> <td>(round up to a whole number) x</td> <td>\$250.00</td> <td>= \$ 0.00</td> </tr> </tbody> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 = 0	/ 50 = 0	(round up to a whole number) x	\$250.00	= \$ 0.00																																							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																																																				
- 100 = 0	/ 50 = 0	(round up to a whole number) x	\$250.00	= \$ 0.00																																																				
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: 37 CFR 1.20(d) Terminal Disclaimer Fee <table border="1"> <thead> <tr> <th>Fees Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>\$130.00</td> </tr> </tbody> </table>								Fees Paid (\$)	\$130.00																																															
Fees Paid (\$)																																																								
\$130.00																																																								

SUBMITTED BY			
Signature 	Registration No. 34,124 (Attorney/Agent)	Telephone 302-283-2136	
Name (Print/Type) Blake T. Blederman	Date June 30, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
OIE/IAP

JUL 01 2005

RECEIVED
CENTRAL FAX CENTER

JUN 30 2005

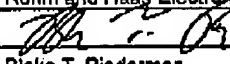
PTO/SB/21 (09-04)

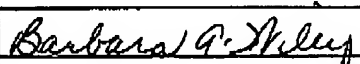
Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/670,634	
	Filing Date	September 25, 2003	
	First Named Inventor	Bian, Jinru	
	Art Unit	1755	
	Examiner Name	M. A. Marcheschi	
Total Number of Pages in This Submission	10	Attorney Docket Number	03010US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Terminal Disclaimer
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Rohm and Haas Electronic Materials CMP Holdings, Inc.		
Signature			
Printed name	Bleke T. Biederman		
Date	June 30, 2005	Reg. No.	34,124

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Barbara A. Wiley	Date	June 30, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER
JUN 30 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Bian et al.

Application No.: 10/670,534

Filed: 9/25/2003

Title: HIGH RATE BARRIER POLISHING
COMPOSITION

Attorney Docket No.: 03010US

Art Unit:
1755Examiner:
M. A. MarcheschiCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450RESPONSE AFTER FINAL REJECTION

Dear Sir:

In response to the Office Action of May 9, 2005, having a statutory due date of August 9, 2005, please reconsider this application with claims pending as follows: